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PTO/SB/01 (12-97)
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number RAO-011

First Named Inventor Rao et al

COMPLETE IF KNOWN

Application Number 09 / 680,611

Filing Date 10/06/2000

Group Art Unit Not Assigned

Examiner Name Not Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD FOR PROVIDING GASTRONOMIC INFORMATION AND
INSTRUCTION WITH AN INTERNET SERVER**

the specification of which (Title of the Invention)

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) 10/06/2000 as United States Application Number or PCT International

Application Number 09/680,611 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

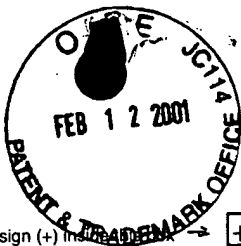
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
08/700,986	08/21/96	
09/281,739	06/04/99	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar Code
Label here

Name	Registration Number	Name	Registration Number
Stephen E. Baldwin	27,769		
Marion E. Cavanaugh	40,550		
Laurence J. Shaw	34,723		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

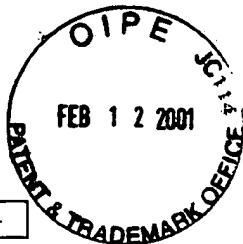
Direct all correspondence to: ☐ Customer Number or Bar Code Label ☒ Correspondence address below

Name	Stephen E. Baldwin				
Address	Trial & Technology Law Group				
Address	545 Middlefield Road, Suite 220				
City	Menlo Park	State	CA	ZIP	94025
Country	USA	Telephone	(650) 324-2258	Fax	(650) 324-0178

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Raman K.		Rao			
Inventor's Signature				Date	JAN 8 2001
Residence: City	Palo Alto	State	CA	Country	USA
Post Office Address	3087 Alexis Drive				
Post Office Address					
City	Palo Alto	State	CA	ZIP	94304
				Country	USA

☒ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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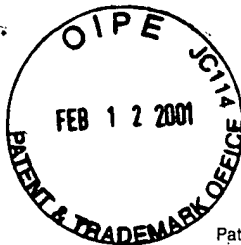
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Sunil K.				Rao			
Inventor's Signature	<i>Sunil K. Rao</i>					Date	JAN 8 2001
Residence: City	Palo Alto	State	CA	Country	USA	Citizenship	USA
Post Office Address	3087 Alexis Drive						
Post Office Address							
City	Palo Alto	State	CA	ZIP	94304	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Sanjay K.				Rao			
Inventor's Signature	<i>Sanjay K. Rao</i>					Date	JAN 8 2001
Residence: City	Palo Alto	State	CA	Country	USA	Citizenship	USA
Post Office Address	3087 Alexis Drive						
Post Office Address							
City	Palo Alto	State	CA	ZIP	94304	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Rekha				Rao			
Inventor's Signature	<i>Rekha Rao</i>					Date	JAN 8 2001
Residence: City	Palo Alto	State	CA	Country	94304	Citizenship	USA
Post Office Address	3087 Alexis Drive						
Post Office Address							
City	Palo Alto	State	CA	ZIP	94304	Country	USA

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name (first and middle (if any))										Family Name or Surname									
Rajni										Rao									
Inventor's Signature		<i>Rajni Rao</i>										Date		JAN 8 2001					
Residence: City		Palo Alto			State		CA		Country		USA		Citizenship		USA				
Post Office Address		3087 Alexis Drive																	
Post Office Address																			
City		Palo Alto			State		CA		ZIP		94304		Country		USA				
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name (first and middle (if any))										Family Name or Surname									
Inventor's Signature												Date							
Residence: City					State				Country				Citizenship						
Post Office Address																			
Post Office Address																			
City					State				ZIP				Country						
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name (first and middle (if any))										Family Name or Surname									
Inventor's Signature												Date							
Residence: City					State				Country				Citizenship						
Post Office Address																			
Post Office Address																			
City					State				ZIP				Country						

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